

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e) required))	Attorney Docket Number	64373/3
	First Named Inventor	SALOMON, F licia
	COMPLETE IF KNOWN	
	Application Number	/
	Filing Date	
	Art Unit	
	Examiner Name	

As the below named inventor, I hereby declare that:
My residence, mailing address, and citizenship are as stated below next to my name.
I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SYSTEM AND METHOD FOR EVALUATING REGULATORY COMPLIANCE FOR A COMPANY

(Title of the Invention)

the specification of which
☒ is attached hereto
OR
☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (If applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), of 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
2,441,516	Canada	09/18/2003	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on supplemental priority data sheet PTO/SB/02B attached hereto:

DECLARATION — Utility or Design Patent

Direct all correspondence to:		<input checked="" type="checkbox"/> Customer Number or Bar Code Label	27871	OR	<input checked="" type="checkbox"/> Correspondence address below
Name Blake, Cassels & Graydon LLP per Robert H. Nakano (Reg. No. 46,498)					
Address 199 Bay Street					
Address Box 25, Commerce Court West					
City	Toronto	State	Ontario	ZIP	M5L 1A9
Country	Canada	Telephone	416.863.2785	Fax	416.863.2653
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>					
NAME OF SOLE OR FIRST INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Felicia			Family Name or Surname SALOMON		
Inventor's Signature				Date	
Residence: City Don Mills	State ON	Country Canada	Citizenship Canada		
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Mailing Address					
City Don Mills	State ON	Zip M3C 1E6	Country Canada		
NAME OF SECOND INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Adam			Family Name or Surname MASON		
Inventor's Signature				Date	
Residence: City Don Mills	State ON	Country Canada	Citizenship Canada		
Mailing Address 25 St. Dennis Drive, Suite 100					
Mailing Address					
City Don Mills	State ON	ZIP M3C 1E6	Country Canada		
<input checked="" type="checkbox"/> Additional inventors are being named on the <u>1</u> supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto					

DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>1</u> of <u>1</u>
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Name of Additional Joint Inventor, if any:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
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Khashayar			Sajadi		
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Name of Additional Joint Inventor, if any:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
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Dino			Skordoulis		
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Name of Additional Joint Inventor, if any:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])			Family Name or Surname		
Inventor's Signature				Date	
Residence: City		State		Country	
Mailing Address					
Mailing Address					
City		State		Zip	
Country					